

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: John D.Kalvelage et al.

SERIAL NO: Unassigned

FILED: Herewith

FOR: SEALED BLISTER ASSEMBLY

GAU: Unassigned

EXAMINER: Unassigned

**SMALL ENTITY DECLARATION - SMALL BUSINESS CONCERN**

I hereby declare that I am:

The owner of the small business concern identified below:  
 An official of the small business concern empowered to act on behalf of the concern identified below:

Name of Concern: Multi-Comp, Inc.Address of Concern: 10085 Red Run Blvd, Suite 109, Owings Mill, Maryland 21117

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in

the specification filed herewith.  
 the application or patent described above.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below. No rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

no such person, concern or organization.  
 persons, concerns or organizations listed below. (NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities, 37 CFR 1.27)

Full Name	Address	Individual	Small Business Concern	Nonprofit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate; 37 CFR 1.28(b).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name

Title

Signature

Date

C:\Documents\FORMS\small entity - small business concern

CEO  
CEO

12/7/08

**COMBINED DECLARATION FOR RECEIVED APPLICATION AND POWER OF ATTORNEY**  
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER  
**MULTI 9**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought of the invention entitled:

**SEALED BLISTER ASSEMBLY**

the specification of which (check only one item below):

is attached hereto.  
 was filed as United States application

Serial No. \_\_\_\_\_

on \_\_\_\_\_

and was amended

on \_\_\_\_\_ (if applicable).

was filed as PCT international application

Number \_\_\_\_\_

on \_\_\_\_\_,

and was amended under PCT Article 19

on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim priority benefits under Title 35, United States Code, §119 of the following United States Provisional Application and of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

**PRIOR U.S. PROVISIONAL AND FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:**

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**Combined Declaration For Patent Application and Power of Attorney (Continued)**  
 (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER  
**MULTI 9**

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); John H. Thomas (33,460); Luan C. Do (38,434); Catherine M. Joyce (40,668); and Nancy Axelrod (44,014) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: **MILLEN, WHITE, ZELANO & BRANIGAN, P.C.**  
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 2200 Clarendon Boulevard  
 Arlington, Virginia 22201

Telephone No.  
**703/243-6333**

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**703/813-5325**

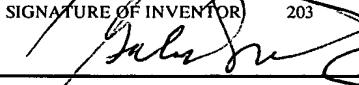
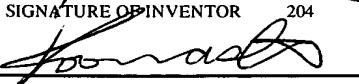
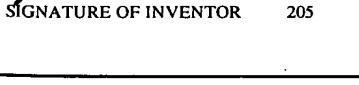
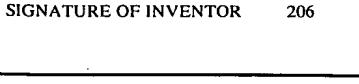
1	FULL NAME OF INVENTOR	FAMILY NAME Kalvelage	FIRST GIVEN NAME John	SECOND GIVEN NAME D
2	RESIDENCE & CITIZENSHIP	CITY Decatur	STATE OR FOREIGN COUNTRY Georgia	COUNTRY OF CITIZENSHIP USA
3	POST OFFICE ADDRESS	STREET 1436 Diamond Head Drive	CITY Decatur	STATE & ZIP CODE/COUNTRY Georgia 30033
4	FULL NAME OF INVENTOR	FAMILY NAME Salditch	FIRST GIVEN NAME Ian	SECOND GIVEN NAME E.
5	RESIDENCE & CITIZENSHIP	CITY Owings Mill	STATE OR FOREIGN COUNTRY Maryland	COUNTRY OF CITIZENSHIP USA
6	POST OFFICE ADDRESS	STREET 10085 Red Run Boulevard	CITY Owings Mill	STATE & ZIP CODE/COUNTRY Maryland 21117
7	FULL NAME OF INVENTOR	FAMILY NAME Nickey, Jr.	FIRST GIVEN NAME Galen	SECOND GIVEN NAME
8	RESIDENCE & CITIZENSHIP	CITY Owings Mill	STATE OR FOREIGN COUNTRY Maryland	COUNTRY OF CITIZENSHIP USA
9	POST OFFICE ADDRESS	STREET 10085 Red Run Boulevard	CITY Owings Mill	STATE & ZIP CODE/COUNTRY Maryland 21117
10	FULL NAME OF INVENTOR	FAMILY NAME Ots	FIRST GIVEN NAME Toomas	SECOND GIVEN NAME
11	RESIDENCE & CITIZENSHIP	CITY Ontario	STATE OR FOREIGN COUNTRY Canada	COUNTRY OF CITIZENSHIP Canadian
12	POST OFFICE ADDRESS	STREET 434 Attwell Drive, Etobicoke	CITY Ontario	STATE & ZIP CODE/COUNTRY Canada M9W5C3

**Combined Declaration for Patent Application and Power of Attorney (Continued)**  
 (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER  
**MULTI 9**

<b>205</b>	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
<b>206</b>	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
<b>207</b>	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
<b>208</b>	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
<b>209</b>	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
<b>210</b>	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 	DATE 12/8/00	SIGNATURE OF INVENTOR 207 	DATE
SIGNATURE OF INVENTOR 202 	DATE 12/7/00	SIGNATURE OF INVENTOR 208 	DATE
SIGNATURE OF INVENTOR 203 	DATE 12/7/00	SIGNATURE OF INVENTOR 209 	DATE
SIGNATURE OF INVENTOR 204 	DATE 12/02/2000	SIGNATURE OF INVENTOR 210 	DATE
SIGNATURE OF INVENTOR 205 	DATE	SIGNATURE OF INVENTOR 211 	DATE
SIGNATURE OF INVENTOR 206 	DATE	SIGNATURE OF INVENTOR 212 	DATE